## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE
Sancia B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N9600004515 (0)

FT LAUDERDALE LEATHER GUILD, INC.

Principal Place of Business

Mailing Address

## FILED Jun 20 1997 8:00am Secretary of State

IALLAHASSER FLUNDA



Trincipal Flace of Business	Mailing Address			
1207 NW 6 AVE FT LAUDERDALE FL 33311	1207 NW 6 AVE FT LAUDERDALE FL 33311-60	28		
			3. Date Incorporated or Qualified 08/29/1996	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address	1077	4. FE‡ Number	Applied For
21 2632 Middle Knep K		1372	65-069528	<del></del>
22	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	City & State		6 Floring Compaign Financia	Fee Required
23 For ) AUSBRIDACE FL	28 FT CAUNGE	DAG FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 24 3330-/ 25 Country	29 3333 3	Country	8. This corporation has liability for	
9, Name and Address of Curre		1	10. Name and Address of New Re	
81 Name & KICTT				
KLETT, RANDALL B			dress (P.O. Box Number is Not Acceptate	nia)
92 HIVEN UNIVE				E DR
TEQUESTA FL 33469		83	•	
		84 City		85 Zip Code
		ריייון !	T LAUDGENALE	
<ol> <li>Pursuant to the provisions of Sections 617.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig</li> </ol>	02 and 617.1508, Florida Statutes,	the above-named corpora	rporation submits this statement for the p	urpose of changing its registered
agent. I am familiar with, and accept the oblig	ations of Section 617.0503, Florid	da Statutes.	anona board of directors. Thereby accep	it the appointment as registered
SIGNATURE				MEIL 1992
12. OFFICERS AN	ent and title if applicable (NOTE: F D DIRECTORS	legislered Agent signature requ	uired when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE
TIPLE COLORES ALL	DELETE	1.1 TITLE		Change
NAME ETIC & LANDENCE		1.2 NAME	9000022	
STREET ADDRESS 1207 NOW SIXTH AND		1.3 STREET ADDRESS		3701130014
CITY-ST-ZIP FT LANSCODALD FL	3330E	1.4 CITY-ST-ZIP	******* <b>6</b> ∫	.25 ****61.25
TITLE VILL TENSOR Y	DELETE	2.1 TITLE		Change Addition
NAME JAMES KENDERY		22 NAME		
STREET ADDRESS ST LANGUAGE FL SSEN		2.3 STREET ADDRESS		
CITY-ST-ZIP FT LAUDGODALF FC S	82.72	2. 4 CITY - ST - ZIP		
TITLE SOLUTION OF	DELETE	3.1 TITLE		Change Addition
NAME LAWRENCE & A POR		3.2 NAME		
STREET ADDRESS 2002 HINDLE ZINE DE		3.3 STREET ADDRESS		
	30 y	3.4. CITY - ST - ZIP		
THLE TOCKURE	> □ DELETE	4.1 TITLE		Change Addition
NAME PANOAU & KLETT		4.2 NAME		
STREET ADDRESS 2682 MIDNE PINE D		4.3 STREET ADDRESS		i
CITY-ST-ZIP FT LAUSSONAIR FL 33		4.4 CITY - ST - ZIP		
TITLE	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS .		5.3 STREET ADDRESS		ļ
CITY-ST-ZIP	DELETE	5.4 CITY - ST - ZIP		
TITLE	☐ DELETE	6.1 TITLE		Change Addition
NAME CTRICE ADDRESS		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY - ST - ZIP		

4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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